

MAHONEY & BAKER, P.C.
2740 Route 10 West
Morris Plains, New Jersey 07950
973-898-1000
Attorney for Plaintiff

PERRY GOERNER, Plaintiff, -v- ARTHUR FREUND, Defendant.	SUPERIOR COURT OF NEW JERSEY LAW DIVISION - ESSEX COUNTY DOCKET NO.: Civil Action. CERTIFICATION OF TREATING PHYSICIAN
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I, Eric S. Englestein, M.D., do hereby certify as follows:

1. I am a licensed neurologist of the State of New Jersey and I examined/treated plaintiff, Perry Goerner, for injuries he sustained in an accident that occurred on April 27, 2006.

2. Attached hereto is a true and correct copy of my narrative report regarding my treatment of plaintiff which sets forth the details of his treatment and my diagnosis of his condition.

3. In my opinion within a reasonable degree of medical probability, my patient has sustained an injury which has:

(Choose all appropriate):

_____ resulted in death.

_____ resulted in dismemberment

_____ resulted in significant disfigurement or significant scarring

_____ caused a **displaced fracture**

 X is **permanent and has not healed to function normally.**

4. I certify that the foregoing statements are true to the best of my knowledge, information and belief. I am aware that if any of the foregoing statements made by me are wilfully false, I am subject to punishment.



Eric S. Englestein, M.D.

Dated:

Certification of Treating Physician Pg 3 of 13
Neuro-Specialists of Morris-Sussex, P.A.

Practice limited to Neurology & Electrodiagnostic Studies

Eric S. Englestein, M.D., Ph.D.
DIPLOMATE AMERICAN BOARD OF NEUROLOGY
FELLOW OF THE STROKE COUNCIL
OF THE AMERICAN HEART ASSN.
MEMBER AMERICAN ACADEMY OF NEUROLOGY

Paul J. Roberts, M.D.
DIPLOMATE AMERICAN BOARD OF NEUROLOGY
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Wayne L. Greene, M.D.
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MEMBER AMERICAN ACADEMY OF NEUROLOGY

June 4, 2007

James Mahoney, Esq.
2740 Route 10 West
Morris Plains, New Jersey 07950

RE: PERRY GOERNER

Dear Mr. Mahoney:

I am replying to your request for a narrative report on Mr. Goerner's neurologic condition.

Mr. Goerner was initially seen by me in my office, at the request of Dr. John-Paul Bonnet, on 07/05/06. At that time, Mr. Goerner was 54 years of age, and he gave a history of having been involved in a motor vehicle accident on 04/27/06. The patient was on a motorcycle and reportedly stationary when he was rear-ended by another vehicle and this resulted in his flying forward and striking his head on a van that was in front of him. The patient believes he had a brief subsequent loss of consciousness. He was taken to Chilton Hospital emergency room, but not admitted to the hospital.

Mr. Goerner stated that he initially had various aches and pains and that he had persisted in having neck and low back discomfort as well as some headaches over the top of his head and a dizziness that was constant, but worsened if he drove for more than twenty minutes. He was also noting some ringing in his ears, tremors of his hands, memory difficulty, and some numbness of the right leg.

The patient was attending physical therapy.

He denied ever having had the symptoms noted above prior to the motor vehicle accident.

He mentioned that he had been tried on Tylenol with codeine for his headaches, but that had to be discontinued because it resulted in constipation.

□ Business Office
369 West Blackwell Street
Dover, New Jersey 07801
(973) 361-7606 or (973) 366-5335
Fax (973) 361-8942

□ 330 Sparta Avenue
Building A
Sparta, New Jersey 07871
(973) 579-1089 or (973) 729-1111
Fax (973) 729-2828

□ 254 Mountain Avenue
Hackettstown, New Jersey 07840
(908) 850-5505
Fax (973) 813-8848

RE: PERRY GOERNER
June 4, 2007
Page two

He was then tried on Naprosyn, but that resulted in diarrhea. At the time I was initially seeing him he was using Ultram when needed. He denied being on any other medications or of having any other known medical problems.

Social history was negative for smoking. The patient indicated he drank alcohol occasionally only. He had worked as a painter, but had not been able to work for awhile because of the post accident symptoms.

Mr. Goerner did not have any known medication allergies.

His family history was negative for neurologic disorder.

The patient brought with him a CT scan of the head done 05/07/06, which did not appear remarkable.

Physical examination showed blood pressure to be within normal range. No unusual skin lesions were seen. Chest auscultation did not reveal any rales. Cardiac auscultation was negative for gallops.

Mental Status Exam showed the patient to be alert and fully oriented. There was normal speech. The patient was able to do simple calculations. He was also able to follow a 3-step command and memory was good for 3 out of 3 objects at 3 minutes. There was some evidence of concrete thinking rather than abstract thinking.

Cranial nerve examination showed symmetric pupils without ptosis. There was no papilledema on fundic exam. Eye movements were full without nystagmus. I did not find any facial weakness. Hearing was intact to whisper bilaterally. The tongue was midline when protruded.

Extremity strength was within normal limits diffusely. Reflexes were decreased diffusely. No Babinski responses were demonstrated.

There was a subjective decreased pin sensation over the dorsum of the right foot with normal sensation elsewhere. Position sense was intact in the large toes bilaterally.

No tremors or incoordination were found. The gait was narrow-based and steady. The patient was able to do tandem walking. Romberg was negative.

RE: PERRY GOERNER

June 4, 2007

Page three

The neurologic exam showed hypoactive reflexes diffusely and some subjective decreased pin sensation over the dorsum of the right foot, and some impairment of abstract thinking. The remainder of the neurologic exam was within normal limits. The patient subjectively however was experiencing headaches, dizziness and memory difficulty and I felt that he was suffering from a post-concussion syndrome.

For his various other aches and pains I did recommend the patient be assessed by an orthopedic physician and for the ringing in his ears I suggested that he have an evaluation by an ENT physician.

I was unclear at that time if the dizziness was part of a post-concussion syndrome or possibly due to a post-traumatic vestibular neuronitis.

As headache prophylaxis, I began the patient on 25mg of imipramine nightly.

The patient had a follow-up office assessment with me on 09/11/06. He was still having persistent daily concentration difficulty and memory problems. He was finding that he could not work. He had been writing a TV show prior to the accident, but had not been able to do any meaningful writing since. He mentioned that he was having some visual focusing problems for awhile, but these had resolved.

The patient was taking the prophylactic imipramine that I had prescribed, but only for a few days, as he felt vaguely uncomfortable on the medication when he would awaken in the morning and had discontinued it.

The MRI of the brain and the EEG that I had ordered were within normal limits.

Examination showed normal speech. The patient was able to follow a 3-step command. I did not see any tremors, incoordination or gait dysfunction. Patella reflexes were intact, although the right-sided response was questionably slightly hypoactive, as compared to the left side at this time.

I wrote the patient a prescription to try Desyrel nightly as headache prophylaxis and I also recommended the patient have formal cognitive testing and therapy.

Mr. Goerner was next assessed in my office on 11/15/06. He was taking the trazodone nightly and indicated that at the time he wasn't experiencing any headaches or significant dizziness and felt that his memory problem had improved considerably.

RE: PERRY GOERNER
June 4, 2007
Page four

I believe the neurocognitive testing was never completed, as the patient's insurance company would not okay that.

Examination showed Mr. Goerner to appear to be in a good mood. Speech was normal. The patient was able to follow a 3-step command without difficulty. Patella reflexes were normal symmetrically at this time. No tremor or gait dysfunction was found.

Because clinically there appeared to have been improvement I suggested the patient try decreasing and possibly tapering off of the trazodone. At this point, he was on a 50mg tablet nightly.

Mr. Goerner did go off of the trazodone, but called my office, on 02/21/07, indicating that he didn't feel as well since stopping the trazodone and I recommended he restart it at the previous dose.

The patient was last seen in my office on 03/21/07. He was taking one-half of a 50mg trazodone nightly, but not feeling as good as he had been when taking the whole tablet nightly, as in the past. Both the headaches and dizziness recurred without the medication. The patient was also still experiencing the memory difficulty, without any worsening.

On this occasion, the patient also mentioned some right shoulder pain for which he apparently had been given Flexeril to try by another physician and a MRI scan of the shoulder was pending.

Examination showed the patient to be pleasant with normal speech. No incoordination was found. The gait was not remarkable. Patella reflexes were within normal limits.

I did suggest that Mr. Goerner go back up to the 50mg trazodone nightly, as that had been more effective for him in the past. He indicated that he was still looking into cognitive rehab therapy if his insurance company would cover the expense.

In summary, Mr. Goerner suffered a concussion, on 04/27/06, and this accident resulted in an apparent permanent residual of headaches, dizziness, and memory difficulty as part of a post-concussion syndrome. With medication the patient's symptoms are lessened, but not fully resolved. It is now more than one year since the patient's accident and he has remained symptomatic suggesting that it is likely his symptoms will persist on a chronic basis.

RE: PERRY GOERNER
June 4, 2007
Page five

He will require continued medication and might benefit from future cognitive rehabilitation therapy.

These symptoms of the patient are a direct result of the 04/27/06 motor vehicle accident.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Eric S. Englestein", with a long, sweeping horizontal line extending from the end of the signature.

Eric S. Englestein, M.D. Ph.D.

ESE/pcw
DICTATED, NOT READ

369 N. BLACKWELL ST

DOVER NJ 07801

973-351-7506

TAX ID #: 22-2067954

PAT BAL: .00

IES BAL: .96

OTA BAL: .00

SERV	C	INS	A	LINE	INVOICE	RUNNING							
DATE	INV	RD	S	DR	PROG	DESC	COMMENT	CO	CR	PL	AMOUNT	BALANCE	BALANCE

070505	1	1	11	99245	DV	213.00	213.00	NEURO SPECIALISTS OF , ERIC ENGLESTEIN MD
070505	1	1		CK CHECK 5326	DV	-213.00	.00	
081806	2	1	55	95819 EEG W/HV	SD	100.00	100.00	NEURO SPECIALISTS OF , E ENGLESTEIN-DOPPLER ASSO
101906	2	1		AP MAIL CHECK 5400	AP	-100.00	.00	
091106	3	1	11	99214	DV	72.45	72.45	NEURO SPECIALISTS OF , ERIC ENGLESTEIN MD
091106	3	1		CK CHECK 5373	DV	-72.45	.00	
111506	4	1	11	99213 F/U	DV	80.00	80.00	NEURO SPECIALISTS OF , ERIC ENGLESTEIN MD
111506	4	1		CK CHECK 5429	DV	-80.00	.00	
032107	5	1	11	99213 F/U	DV	80.00	80.00	NEURO SPECIALISTS OF , ERIC ENGLESTEIN MD
032107	5	1		CK CHECK 5482	DV	-80.00	.00	
061207	6	1	11	LAWYE NARRATIVE	DV	500.00	500.00	NEURO SPECIALISTS OF , ERIC ENGLESTEIN MD
061207	6	1		CK CHECK 4277	DV	-500.00	.00	
091907	7	1	11	99214 F/U	DV	120.00	120.00	NEURO SPECIALISTS OF , ERIC ENGLESTEIN MD
091907	7	1		CK CHECK 5543	DV	-120.00	.00	

END OF PATIENT HISTORY

*** TOTALS *** CHARGES: 1,165.45 PAYMENTS: -1,165.45 ADJUSTS: .00

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HARDSHIP LETTER

I am a Permanently Mentally and Physically Disabled Senior, I collect Social Security Disability in the amount of \$852.00 Monthly, starting on 04/27/2006.

There has been no change in my income since the mortgage was procured, the first payment was on 5/1/07, I could not afford it then and not now.

In August we had a drought and I found the septic to be leeching/flowing into a pond that was built in front of my house, most if not all of the fish died and the pond had a green thick layer that smelled like septic until now, we have had rain and I try not to use the bathroom as it has backed up quite a few times, into the dishwasher and sink. I had an excavator come out and give me an estimate for repair, I cannot afford the repairs.

I have asked for a modification and sent in documents in March Of 2009, got a confirmation # and no response, sent in more documents, had called at least 6 times, I have all the dates etc.. for litigation if need be, I have never been contacted by this mortgage company on any matter, not by phone or mail until I had called about this foreclosure, you never called me for late payments.

I stopped paying my mortgage 9/1/2010.

I was in an accident on 04/27/2006 where I was rear ended while on my motorcycle stopped behind a van, being ejected and striking the van's rear door with my head, I have permanent memory disability and physical injuries to my neck, back, arm's, legs, hands, etc...

I do not work, I am almost completely homebound, I walk in circles all day long because of my concentration/memory loss, I have to stay in the kitchen so I don't leave and forget what is on the stove, I have burnt many things because of this, I don't remember unless I smell something burning. I do some leathercraft to keep me busy suggested by my doctor.

I have constant ringing in my ears, and am dizzy continually, sleep a lot, I forget where I am going even to the store, I have to stop and try to remember, this is my life.

I cannot bend over because of my back and neck injuries, and do not clean very well, when I do I end up in bed for days, my back is severely damaged as my neck is too, I've had 2 back operations, and need another.

The truth of the matter is, this seems to be a fraudulent loan, I never lied on any documents:

1. I was solicited for this loan by the Mortgage Originator
2. Since 4/27/2006 I was on a fixed income of \$852.00 a month, and Mortgagor knew of my inability to work, I had not worked for almost a year when I obtained the mortgage in 2007
3. I was given a Mortgage on my house for \$2,879.00 monthly for 30 yrs with \$852. Income
4. I was not mentally-capable of signing these documents, and was on medication at the signing.

Last Transaction

Date	Time	Type	Identification	Duration	Pages	Result
Mar 06	12:09p	Fax Sent	18665096177	0:57	1	OK

Sussex, NJ, 07461
973-875-6474

March 6, 2012

GMAC
Account # 7473329357
Fax:866-509-6177

RE: Notice of : CEASE AND DESIST

To whom it may concern:

This is a notice to cease and desist any and all phone calls or any other type of contact to the below mentioned phone number by which your company has been harassing said person's by calling at all hours of the day while trying to collect a debt.

You have been harassing a 100% Mentally & Physically Disabled Person, who resides at the above residence, and was given a fraudulent mortgage, and was denied a modification.

If you need to contact the above person, please send everything in writing at the above address.

DO NOT CALL : 973-875-6474 from this day forward.

Sincerely,



Perry Goerner

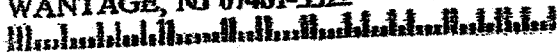
EX-6

**Social Security Administration
Retirement, Survivors and Disability Insurance
Notice of Award**

Mid-Atlantic Program Service Center
300 Spring Garden Street
Philadelphia, Pennsylvania 19123-2992
Date: June 3, 2006
Claim Number: [REDACTED]

000947 MCSM72 N3 2358

PERRY E GOERNER
12 WANTAGE SCHOOL RD
WANTAGE, NJ 07461-3322



You are entitled to monthly disability benefits beginning October 2006.

The Date You Became Disabled

We found that you became disabled under our rules on April 27, 2006.

However, you have to be disabled for 5 full calendar months in a row before you can be entitled to benefits. For these reasons, your first month of entitlement to benefits is October 2006.

4-75 1-537 10/23/13 13 15:50:27

Your New Benefit Amount

2813849

BENEFICIARY'S NAME: PERRY E GOERNER

Your Social Security benefits will increase by 1.7 percent in 2013 because of a rise in the cost of living. **You can use this letter when you need proof of your benefit amount to receive food, rent, or energy assistance; bank loans; or for other business.** Saving this letter could save you the inconvenience of making a trip to a local office and waiting in line to obtain a new document.

How Much Will I Get And When?

• Your monthly amount (before deductions) is	\$998.90
• The amount we deduct for Medicare medical insurance is	\$104.90
(If you did not have Medicare as of Nov. 15, 2012, or if someone else pays your premium, we show \$0.00.)	
• The amount we deduct for your Medicare prescription drug plan is	\$0.00
(If you did not elect withholding as of Nov. 1, 2012, we show \$0.00.)	
• The amount we deduct for voluntary Federal tax withholding is	\$0.00
(If you did not elect voluntary tax withholding as of Nov. 15, 2012, we show \$0.00.)	
• After we take any other deductions, you will receive	\$894.00
on Jan. 23, 2013.	

If you disagree with any of these amounts, you must write to us within 60 days from the date you receive this letter. We would be happy to review the amounts.

You may receive your benefits through direct deposit, a Direct Express® card, or an Electronic Transfer Account. If you still receive a check, please remember that you must switch to an electronic payment by March 1, 2013. For more information, please visit www.godirect.org or call 1-800-333-1795.

What If I Have Questions?

Please visit our website at www.socialsecurity.gov for more information and a variety of online services. You also can call 1-800-772-1213 and speak to a representative from 7 a.m. until 7 p.m., Monday through Friday. Recorded information and services are available 24 hours a day. Our lines

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